2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A97000002339

1. Entity Name

TWC Seventy-Three, Ltd.

FILED

00 MAY 15 PM 3:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
6200 Courtney Campbell Cswy Suite 600 Tampa, FL 33607	6200 Courtney Campbell Cswy Suite 600 Tampa, FL 33607

2. Principal Place of Business	3. Mailing Address
655 North Franklin Street	655 North Franklin Street
Suite, Apt. #, etc.: Suite2200	Suite, Apt. #, etc.: Suite 2200
City & State: Tampa, FL	City & State: Tampa,FL
Zip: 33602 Country: Hillsborough	Zip: 33602 Country: Hillsborough

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3485226 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
McDonough, Brian J. Stearns Weaver Miller Weissler Alhadeff 150 W. Flagler St., Museum Tower Ste 2200 Miami, FL 33130	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record.	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
$50.00	$100.00	

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	A97000002324	STREET ADDRESS	655 North Franklin Street, Suite 2200
NAME	TWC Seventy-Three Partners, Ltd.	CITY-ST-ZIP	Tampa, FL 33602
STREET ADDRESS	6200 Courtney Campbell Cswy Ste 600		
CITY-ST-ZIP	Tampa, FL 33607		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
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DOCUMENT #		STREET ADDRESS	900003251839--2
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DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

TWC Seventy-Three, Ltd. By: TWC Seventy-Three Partners, Ltd. By: TWC Seventy-Three, Inc.

SIGNATURE: By: Debra F. Koehler (813) 281-8888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #

Debra F. Koehler, Senior Vice President